

POSITION	ID NO.	DATE
CLASSIFIER	1 15	11/29/93
EXAMINER	354	11/29/93
TYPIST	354	2-7-94
VERIFIER	LV80	6/8/94
CORPS CORR.		
SPEC. HAND	233	2-5-94
FILE MAINT.	KS	12-1-93
DRAFTING		

# INDEX OF CLAIMS

Claim	Final	Original	Date
1	1	12/9/94	
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BEST AVAILABLE COPY

SYMBOLS  
 ✓ ..... Rejected  
 = ..... Allowed  
 (Through numeral) Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
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